

ATTORNEY CERTIFICATION AND ACKNOWLEDGEMENT

As an attorney certified as a specialist by _____,¹ I expressly recognize and acknowledge that the Supreme court of Ohio ["Supreme Court"] and the Commission on Certification of Attorneys as Specialists in the State of Ohio ["Commission"] do not and shall not be construed to make any implied or expressed representation or warranty regarding the process by which I was certified or my abilities as a certified attorney.

I further understand that responsibility, obligation and liability in any way arising from my certification and holding myself out to the public and to other attorneys as a certified attorney are expressly disclaimed by the Supreme Court and the Commission. Furthermore, I knowingly accept this disclaimer as a condition of my certification as a specialist by _____.

I expressly understand and acknowledge that as an attorney specialist certified under Gov. Bar R. XIV of Ohio I may communicate the fact that I am certified by _____ as a specialist in the field of law involved. However, as a specialist I agree that I shall not represent, expressly or impliedly, that I am certified by the Supreme Court or the Commission or by an entity other than _____. However, I understand and acknowledge that as a certified attorney I may represent that _____ is approved by the Commission, but I shall not represent that _____ is approved by the Supreme Court.

Furthermore, in compliance with §4.02(J) of the Commission's Standards for Accreditation of Specialty Certification ["Standards"], I hereby certify that currently, and at all times during which I hold myself out as a certified attorney specialist, the following information is and will be true:

- (a) I am, and will be, an active lawyer and in good standing pursuant to Gov. Bar R. VI of the Supreme Court;
- (b) My fitness to practice is not, and will not be, in question by virtue of disciplinary action in another state other than Ohio;
- (c) I have and will continuously maintain coverage by professional liability insurance through a reputable company in an amount not less than Five Hundred Thousand Dollars per loss,

OR

my practice relationship with my clients will fully cover any professional liability claim made against me in an amount not less than Five Hundred Thousand Dollars per loss;
- (d) I have and will maintain the financial ability to pay all claims that fall within the deductible amount of my professional liability policy;

I fully understand that as a certified attorney in Ohio it is my obligation to immediately report to _____ any change in my status which is otherwise required by (a), (b), (c) or (d) hereinabove, including but not limited to any cancellation or change in my insurance coverage.

As further proof to _____ of my compliance with the §4.02(J) of the Standards I have attached hereto a copy of (1) a Certificate of Good Standing from the Supreme Court, and (2) my current insurance policy declaration page or a notarized letter or letters demonstrating that my practice relationship with my clients will fully cover any professional liability claim made against me in an amount not less than Five Hundred Thousand Dollars per loss. Furthermore, I acknowledge that in order to continue to be certified by _____, it is my responsibility to sign this form and provide current copies of each of these two documents to _____ not less frequently than annually or as _____ shall require, and that my failure to fulfill this obligation will cause failure to comply with these requirements. I also understand that my failure in this regard may result in disciplinary action by the Supreme Court.

Signature of Attorney

Date Signed

CCAS Form 6

¹ The full name of the certifying agency must be inserted in each location where a "blank" space is shown on this document.

